

Victim Letter Procedure

As soon as possible, but **no later than 14 calendar days** after a violent criminal offense described below occurs in or on the grounds of the school the student attends, the District shall notify the parent of a student who is a victim of the offense of the parent's right to request a transfer. **[See Board Policy FDE]**

All administrators should follow the procedures outlined below regarding the distribution of victim letters.

A certified letter must be sent home **no later than 14 calendar days after the incident**, if the student was a victim of any of the following offenses as described in PEIMS:

Offense Code	Offense
17	Attempted Murder
18	Indecency with a Child
19	Aggravated Kidnapping
30	Aggravated Assault
32	Sexual Assault, Aggravated Sexual Assault
46	Aggravated Robbery
57	Continuous Sexual Abuse of a Child

For each offense where there is a student victim, the AP handling the situation will:

_____ If a letter is warranted by the criteria above, contact the parent and prepare *Notice to Parent of Student Victim of a Violent Offense Letter*.

_____ Include the *Request for School Transfer* form in the victim letter sent home to the parent.

- a. If the *Request for School Transfer* form is returned with a request to transfer, the principal should contact the Assistant Superintendent.
- b. When the district has decided on the transfer request, the principal (or designee) will send the parent a completed *District Response to School Transfer Unsafe School Form*.
- c. If a transfer is approved, fill out the TEA required *SSCO Victim Transfer Request Form*. Put a copy in the student's permanent folder so it can be produced upon request by TEA.

_____ Copies of the following should be sent as email attachments to the Assistant Superintendent and the General Counsel and maintained in student's permanent folder.

- a. The offender's discipline referral
- b. The *Notice to Parent of Student Victim of a Violent Offense Letter*
- c. The *Request for School Transfer Unsafe School* form
- d. The *District Response to School Transfer* form (if applicable)
- e. The *TEA required SSCO Victim Transfer Request* form (if applicable)

DATE ISSUED: 02/28/2022

Clear Creek ISD
Notice to Parents of Student Victim of a Violent Criminal Offense

Date:
School:
Name of Parent / Guardian:
Name of Student:
Address:

Dear Parent / Guardian:

We were very sorry to hear that your child was a victim of a violent criminal offense while in or on the school grounds. Words are inadequate to express our continuing concerns for the well-being and safety of your child.

We are committed to providing a safe learning environment for all students.

In compliance with the state and federal requirements, we are required to notify parents of children who have been the victims of a violent criminal offense in or on school grounds of their right to transfer their child to another public school or public charter school, if available, within the district. Your child also has the right to remain at his/her current school.

We need to hear from you, please complete the attached form "Request for School Transfer" and return to your child's current school.

If you choose to transfer your child, you will be provided with a choice of schools available. We will fully understand and accept your decision and extend to you and your child every assistance in facilitating a transfer or continuing enrollment at his/her school.

Please contact me at the telephone number listed below if you would like to schedule an appointment to discuss this situation.

Sincerely,

Name
Title
Telephone Number
Email Address

**Clear Creek ISD
Request for School Transfer
Student Victim of a Violent Criminal Offense**

Use a separate form for each child and return to your child's current school.

Date:

School:

Name of Student:

Name of Parent / Guardian:

As the parent or legal guardian of the above-named child, I am responding to the notice received from the district that my child was a victim of a violent criminal offense while in or on the school grounds.

- Transfer my child to another school within the district or a public charter school, if available.
- Keep my child at his or her current school.
- I would like more information and assistance prior to making a decision.

If requesting transfer to another school, I understand a transfer will:

- be to another public school or public charter school within the district that may be selected by the district and is available to accept transfer students;
- require me to provide transportation to the new school
- be temporary or permanent, depending on the needs of my child.

I understand I will receive notification from the district of the schools to which my child may transfer and information on whether transportation can be provided.

Parent/Guardian Signature: _____ Date: _____

Address: _____ City: _____ Zip: _____

Home Phone Number: _____ Work/Cell Phone Number: _____

**Clear Creek ISD
District Response to School Transfer
Victim of Violent Offense**

Date:
School:
Name of Student:

Dear Parent / Guardian:

We have received your request to transfer your child to another school in Clear Creek ISD. Based on our determination of the schools available for transfer, he/she may transfer to one of the following schools:

- _____
- _____
- _____
- _____

The district will not provide transportation for your child.

Please complete the section below, sign and return this form to your child's school by _____ (date). We estimate this transfer being completed within _____ days.

Thank you for your interest in the quality of your child's education. We encourage your continued involvement toward their academic success.

Sincerely,

Name

Title

Parent/Guardian: Please complete the section below and return the entire form to the school office.

Parent Acknowledgement of School Transfer

Date:
Name of Student:
Name of Parent/Guardian:
School:

I have read and understand the district's response to the request to transfer my child to another school in the district. I wish to:

- Transfer my child to _____.
- Cancel my request to transfer my child to another school.

Parent/Guardian Signature: _____
Date: _____